

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	H.A.		06/05/01
O.I.P.E. CLASSIFIER	M		06-12-01
FORMALITY REVIEW	K.C.	JCS(70)	07/30/01
RESPONSE FORMALITY REVIEW	JPL	1030	10-1-01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	N
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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